# **Application Data Sheet**

#### **Application Information**

Application Type: Regular

Subject Matter: Utility

CD-ROM or CD-R?: None

Number of CD disks: 0

Number of copies of CDs: 0

Title: System and Method of Facilitating and Evaluating

User Thinking about an Arbitrary Problem Using an

**Archetype Process** 

Attorney Docket Number: 286969.122

Request for Early Publication?: No

Request for Non-Publication?: No

Total Drawing Sheets:: 51

Small Entity?:: Yes

Petition Included?: No

Secrecy Order in Parent Appl.?: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Linda

Middle Name:: S.

Family Name:: Higgins

Name Suffix::

City of Residence:: Marblehead

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BOSTON 1778957v1

State or Province of Residence:: MA

Country of Residence:: USA

Street of mailing address:: 28 Beacon Street

City of mailing address:: Marblehead

State or Province of mailing

address:: MA

Postal or Zip Code of mailing

address:: 01945

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: James

Middle Name:: R.

Family Name:: Heidenreich

Name Suffix::

City of Residence:: Marblehead

State or Province of Residence:: MA

Country of Residence:: USA

Street of mailing address:: 28 Beacon Street

City of mailing address:: Marblehead

State or Province of mailing MA

address::

Postal or Zip Code of mailing

address:: 01945

#### **Correspondence Information**

Correspondence Customer

Number::

23483

Phone number::

(617) 526-6000; (617) 526-6466

Fax Number::

(617) 526-5000

E-Mail address::

peter.dichiara@haledorr.com

#### **Representative Information**

Representative Customer

Number::

23483

### **Domestic Priority Information**

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This application is a	An application	60/425,343	11/11/02
	claiming the benefit		
	under 35 USC		
	119(e)		

#### **Assignment Information**

Assignee name::

The Greenfield Group

Street of mailing address::

28 Beacon Street

City of mailing address::

Marblehead

State or Province of mailing

address::

MA

Postal or Zip Code of mailing

address::

01945

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